STATEWIDE EVALUATION OF GRADUATE MEDICAL EDUCATION IN INDIANA

Principal Investigator

Hannah L. Maxey, PhD, MPH

Application Institution

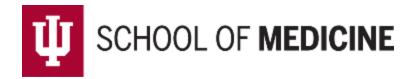
Indiana University

Amount Requested

\$74,354

Project Period

June 1st – September 30, 2016



The Bowen Center for Health Workforce Research and Policy

Mission

 To improve population health by contributing to informed health workforce policy through data management, community engagement, and original research.

Values

- Community
- Excellence
- Integrity
- Collaboration
- Equity



Project Team

- Hannah Maxey, PhD, MPH
 - Assistant Professor, Family Medicine
 - Director, Bowen Center
- Connor Norwood, MHA
 - Research Associate, Family Medicine
 - Asst. Director, Bowen Center
- Komal Kochhar, MBBS, MHA
 - Assistant Research Professor, Family Medicine
 - Director, Educational Research and Data Analysis, Dean's Office of Educational Affairs

Project Team: Previous Experience

GME Exit Surveys (IUSM & IMEB)

Purpose

 To understand the reasons why physician residents choose to practice in specific locations in order to inform recruitment and retention efforts.

Outcome

 This information is being used to improve efforts to recruit and retain resident physicians in areas of need within the state.

Recruitment/Retention of IUSM Graduates

	Recruited		Retained	
	Indiana	Out-State	Indiana	Out-State
2008-2013	50%	50%	50%	50%
2014-2015	40%	60%	60%	40%

Statewide GME Expansion Framework

- Purpose
 - Assessed current capacity and funding environment for Graduate Medical Education
 - Projected a gap ~500 residency slots in Indiana by 2020.
- Outcome
 - Informed House Bill 1323, which intends to increase residency slots in Indiana.

National Health Services Corps Evaluation

Purpose:

Assess Recruitment &
 Retention Associated with
 NHSC Expansion through
 ARRA funding (2009)

Project Outcome:

 Enhanced understanding of barriers to recruiting and retaining health professionals



https://scholarworks.iupui.edu/bitstream/handle/1805/4924/Maxey-et-al 2013 RecruitmentRetentationEvaluationARRA2009.pdf?sequence=5

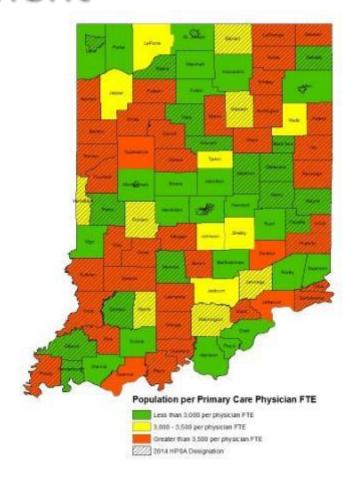
Indiana Primary Care Needs Assessment

Purpose

 Identify primary care physician workforce capacity to inform recruitment/retention initiatives (state and federal)

Outcomes

MUA/P: 5; Primary Care HPSAGeographic: 10 & Low-Income:41



Governor's Health Workforce Council

- Purpose:
 - Health Workforce Policy Coordination across multiple sectors/disciplines
- Our Role:
 - Expert and Administrative Support
- Project Outcomes:
 - Summit (June 2016)
 - Policy initiatives
 - Educational Training and Pipeline Task Force

Strategically Positioned

- Access to and understanding of Indiana data
- Established strategic partnerships
- Expertise in Health Administration, Health Workforce Policy, and Health Services Research, Data Management

Research Plan

GME Project Objectives

- 1. Needs Assessment
- 2. Fiscal Impact Assessment
- 3. Legislative Evaluation

OBJ 1: Needs Assessment

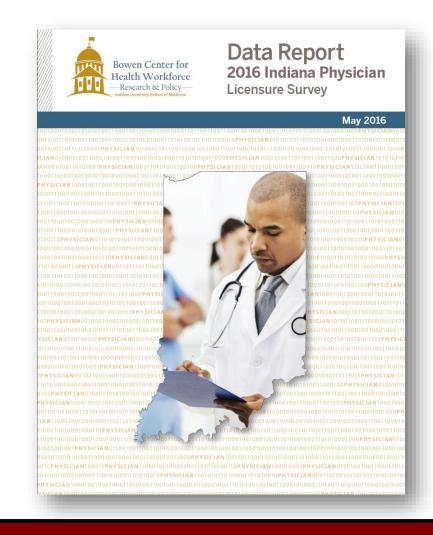
Milestone # 1 (GME Needs Assessment)		
Activity	Description	
Activity 1.1	Statewide evaluation of the need for additional graduate medical education (GME) slots.	
Activity 1.2	Assessment of physician shortages by specialty in Indiana and the impact additional GME slots will have on addressing shortages.	
Activity 1.3	Outlining of viable residency program examples beyond traditional residencies and analysis of the viability of how, if possible, such programs can be used to meet the needs of currently designated underserved primary care areas in Indiana	
Activity 1.4	A listing of Indiana hospitals, non-profit organizations and other qualifying entities meeting legislative requirements for expansion of resident positions	
Activity 1.5	Identification of hospitals or entities which would be considered "virgin" or that have other designation which would allow for the best funding options	
Activity 1.6	Defining and identification of infrastructure needs an entity may need to develop or expand GME.	

Approach (1.1-1.6)

- Review literature/best practice/expert consultation
 - PubMed, HRSA, AAMC, NGA
- Data collection
 - Secondary sources (Workforce & Educational database)*
- Analysis
- Report/recommendation development

Physician Re-Licensure Data

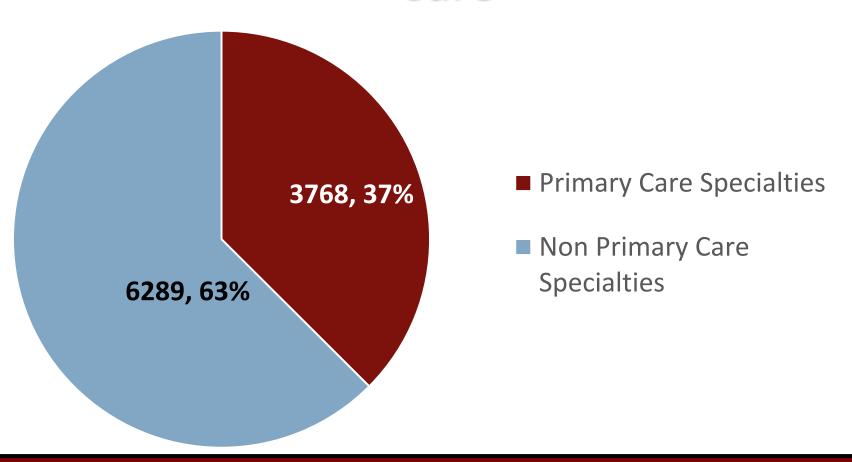
- Define the Physician
 Workforce in Indiana
- Analyze trends in Indiana's Physician Workforce
- Data used for needs assessments and workforce planning efforts



2015 Indiana Physician Workforce

- 10,057 Actively Practice Physicians
- 37 % in Primary Care
- Less Than ½ of PCP completed residency in Indiana

Indiana Physician Workforce: Primary Care



Educational Experience

	Medical School	Residency	Total
	N (%)	N (%)	N (%)
Indiana	3569 (35.6)	3942 (39.3)	7511 (37.8)
Contiguous States	2094 (20.9)	2770 (27.6)	4864 (24.5)
Other US States	2303 (23.0)	3062 (30.6)	3062 (30.6)
Another Country	2003 (20.0)	139 (1.4)	2142 (10.8)

Note: AAMC reports 55.1% of Indiana physicians are retained in state after completion of graduate medical education

https://www.aamc.org/download/447174/data/indianaprofile.pdf

OBJ 2: Fiscal Impact Assessment

Milestone # 2 (Fiscal Impact Assessment)			
Activity 2.1	Total cost of establishing new residency programs and new slots within existing programs		
Activity 2.2	A breakdown of the total cost of establishing new residency programs by identified primary care specialty		
Activity 2.3	A proposed methodology for recipients to fulfill the 25% of matching funds awarded requirement and what may be including as part of matching funds		
Activity 2.4	An evaluation of funding sources Indiana is currently not utilizing that would impact the ability to expand GME in the state		
Activity 2.5	Recommendations regarding the level of financial participation which would be expected of an entity and what would be required of a host entity to participate in GME expansion		
Activity 2.6	A proposed application process and form for an entity wishing to request funds for GME expansion		
Activity 2.7	Identification of sources of technical assistance available for entities wishing to establish a residency program		

Approach (2.1-2.7)

- Review literature/best practice/expert consultation
 - NGA (state funding innovations), NACHC (health center models)
- Data/resources collection
 - Secondary sources (financial data and fiscal records)
 - Qualitative data (key informant interviews)
- Analysis
- Report/recommendation development

OBJ 3: Legislative Evaluation

	Milestone # 3 (Legislative Evaluation)
Activity 3.1	Review of past and current initiatives in Indiana addressing Graduate Medical Education (GME) including legislative, healthcare care administrative, regional
11000000 5.1	and local initiatives to address the state's physician workforce needs
	Review of similar legislative initiatives to address GME expansion in other states, how implemented, the results of those initiatives, and how community, not-for-
Activity 3.2	profit and other entities were engaged in funding or supporting the GME expansion process
	Identification of effective best practices on encouraging and promoting medical
Activity 3.3	students to complete a primary care residency in their home state of medical
	school training.

Approach 3.1-3.3

- Complete Review of GME Related Legislation Nationwide
 - LexisNexis Advanced database
 - Provides full-text documents for over 5,900 sources in business, news, medicine and law
 - Scan of grey and white literature
 - Consultation with NGA and national experts
- Expand on Needs Assessment completed in Milestone 1 through secondary data analysis

Deliverables

Final Reports

- Needs Assessment (Activities 1.1-1.6)
- Fiscal Impact Assessment (Activities 2.1-2.7)
- Legislative Review (Activities 3.1-3.3)

Due Date:

- September 16, 2016

Progress Reports

	Milestone # 4 (Summary Report)	
Activity 4.1	Policy Brief Executive Summary	
Activity 4.2	Progress update 1 (1-2 Page Progress Report on all activities to date)* Progress update 2 (1-2 Page Progress Report on all activities to date)*	September 16, 2016
Activity 4.3	PowerPoint Presentation**	
* Progress upda	tes will be delivered on 7/1/2016 and 8/5/2016 as requested in the RFP	•

^{**}PowerPoint presentation will be delivered at 8/16/2016 GME Board Meeting as requested in the RFP

Evaluation Plan

- Framework for Evaluation
 - Short and long term strategies

- Due Date
 - September 16, 2016



Budget Justification

- Total Requested: \$74,354
- Personnel Salary and Fringe
 - **-** \$47,716
- Travel
 - Out of State \$5,463
 - In State \$900
- Other Expenses
 - Printing \$200
 - Publication/Dissemination \$2000
- IU Indirect Costs (F&A)
 - **-** \$18,025

Questions